

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	S.H	60245	9-16-98
O.I.P.E. CLASSIFIER			9/18/98
FORMALITY REVIEW	ULM	108531	9/24/98

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
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13	✓
14	✓
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16	✓
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20	✓
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41	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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